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TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 ETAS ID: TM317330

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Scion Cardio-Vascular, Inc.		08/05/2013	CORPORATION: FLORIDA

RECEIVING PARTY DATA

Name:	Scion BioMedical, Inc.
Street Address:	14256 SW 119th Avenue
City:	Miami
State/Country:	FLORIDA
Postal Code:	33186
Entity Type:	CORPORATION: FLORIDA

PROPERTY NUMBERS Total: 1

Property Type	Number	Word Mark
Serial Number:	85973050	PEDIA-GUARD

CORRESPONDENCE DATA

Fax Number: 8558540900

Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent

using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.

Phone: (305) 854-0900

Email:trademark@etlaw.comCorrespondent Name:Espinosa | Trueba. PLAddress Line 1:1428 Brickell Ave. Suite 100Address Line 4:Miami, FLORIDA 33131

ATTORNEY DOCKET NUMBER:	PEDIA- GUARD/0069-0027
NAME OF SUBMITTER:	William R. Trueba, Jr.
SIGNATURE:	/William R. Trueba, Jr./
DATE SIGNED:	09/18/2014

Total Attachments: 6

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TRADEMARK
REEL: 005364 FRAME: 0765

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Division of Corporations Electronic Filing Cover Sheet

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(((II130001737753)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : ROETZEL & ANDRESS

Account Number : 12000000121

: (239)649-6200

Fax Number

: (239) 261-3659

er the email address for this business entity to be used for turns annual report mailings. Enter only one email address please.**

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN SCION CARDIO-VASCULAR, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
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C. LEWIS

AUG - 6 2013

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

8/5/2013

TO: Amendment Section

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COVER LETTER

Division of Corporations			·
NAME OF CORPORATION:	Scion Card	dio-Vascular,	lnc.
DOCUMENT NUMBER: PS	960000310	83	
The enclosed Articles of Amend			
Please return all correspondence	•		
_		_	
Dale	S. Bergma	·····	
Roet	zel & Andr	Name of Contact Person Cess. LPA	
		Firm/ Company	
		Address	_
<u>Fort</u>	Lauderdale	e, Florida 333	01
		City/ State and Zip Cod-	C .
lrose@s	scionev.coi	m	
E-m	ail address: (to be use	ed for future annual report	notification)
For further information concern	ing this matter, please	e call:	
Louis R. Rose		at (305	, 259-8880
Name of Contac	t Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the follo	owing amount made (onyable to the Florida Dep	urtment of State:
	43.75 Filing Fee & ertificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filling Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Add Amendment Division of C P.O. Box 632 Tellahassee,	Section Corporations 27	Amen Divisi Clifto 2661	Address diment Section on of Corporations on Building Executive Center Circle bassee, FL 32301

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Articles of Amendment Articles of Incorporation

FILED 13 AUG -5 AM 10: 25

Scion Cardio-Vascular, Inc.

Fax Services

(Name of Corporation as currently filed with the Florida Dept. of State)

P96000031083

amendment(s) to

(Document Number of	f Corporation (if know	n)		
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	la Statutes, this Florido	ı Profit Corporation :	adopts the following amends	mei
A. If amending name, enter the new name of the c	orporation:			
Scion BioMedical, Inc.			The n	ıasıı
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	p, " "Inc, " ar "Co"	ompany," or "incorp A professional corpu	purated" or the abbreviat	ion
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD			(AF-1	
C. Enter new mailing address, if applicable: (Mulling address MAY RE A POST OFFICE Re	<u></u>		•	
D. If amending the registered agent and/or regist new registered agent and/or the new registered		Florida, enter the p	aine of the	
Name of New Registered Agent				
	(Fiorido street ad	aress)	_	
New Registered Office Address:	(City)	, Mori	da(Zip Code)	
New Registered Agent's Signature, if changing R i hereby accept the appointment as registered agent.		nd accept the utilizati	tons of the position	

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Signature of New Registered Agent, if changing

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If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach addittonal sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President, V= Vice President: T= Treusurer; S= Secretary; D= Director; TR= Trusise; C= Chairman or Clerk; CEO = Chief Executive Officer: CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change. Mike Jones. V as Remove, and Sally Smith, SV as an Add.

Example:

A CHange	1_1.	30111 1300	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1)Change			
Add			····
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Кепночв			
4)Change			
Add		·	
Remove			
5) Change			
A dd			
Renove			
6) Change			
Add			
Remove			

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	cem, y necessarily.	(Be specific)			
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13 Aug	
SECRET	if other Malline 25
ALLAHAS	SEE STATE
	orber M. Cone 25 GY OF STATE SEE, FLORIDA

The date of each amendment(s) ad	option:Stee	,,
late this document was signed.	option:SECR	E l'Ar YA sa
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) flicient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	,,	
,	(voling group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
action was not required.	opted by the incorporators without shareholder action and shareholder	
_{Dated} Aug	ust 5, 2013	
Signature	ust 5, 2013 1, Rose	
(By n c selecte	lifector, president or other officer — if directors or officers have not been ad, by an incorporator — if in the hands of a receiver, trustee, or other court ated fiduciary by that fiduciary)	
	Louis R. Rose	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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